

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## 1. Article Addressed to:

American Commercial  
Lines  
1701 E. Market ST  
JEFFERSONVILLE, IN  
47130

## 2. Article Number

(Transfer from service label)

7004 1160 0003 0353 6285

**COMPLETE THIS SECTION ON DELIVERY**

## A. Signature

X

Gregg Wheeler

☐ Agent☐ Addressee

## B. Received by (Printed Name)

Gregg Wheeler

## C. Date of Delivery

6-20-11

## D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

639923

## 3. Service Type

☒

Certified Mail

☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

## 4. Restricted Delivery? (Extra Fee)

☐ Yes

UNITED STATES POSTAL SERVICE

LOUISVILLE KY 402

20 JUN 2011 PM 4

First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-40

- Sender: Please print your name, address, and ZIP+4 in this box •

Kevin Shade (6SF-TE)  
U.S. EPA  
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Dallas, TX 75202

